

Billing Coordinator

Jackson Campus

General Job Summary: The Billing Coordinator's responsibilities include but are not limited to routine billing payment posting and problem solving for insurance payments including HMO, Medicaid and private pay insurance. In addition, the Billing Coordinator is responsible for obtaining and/or entry of prior authorizations, researching and resolving client insurance claims and working with the clinical staff to resolve billing problems. This new full time position, reports to the Director of Finance, and requires prior knowledge along with a flexible schedule in order to develop it entirely.

Essential Functions: Verifies accuracy of billing data and revises errors. Operates software system for billing, posting and claim research. Obtains and/or enters such documents as authorizations, financial agreements and other such ancillary documents as may be necessary. Maintains detailed records and resolves discrepancies in accounting records. Interacts with staff, clients, payer and agencies to answer questions, obtain information and resolve issues. Monitor's aging reports and takes steps as necessary to guarantee payment of claims. Coordinates and collects all necessary information from staff or payers for claim adjudication. Participates in take-back, overpayment and refund process. Recognizes problem accounts and notifies appropriate staff or supervisor to assist in problem solving. Studies insurance trends and advises supervisor of changes. Assists in the creation of manuals and protocols. Participates in chart opening and auditing processes as needed. Maintains positive lines of communication with supervisor and other staff. Responsible for other duties as assigned.

Qualifications:

Knowledge & Experience

- Must be twenty-one (21) years of age
- Associate's required but a Bachelor's Degree is preferred from an accredited university or college.
- At least one year of experience in coding, billing, posting and negotiation of claims. Specialized experience in behavioral health billing services is preferred.
- Prior experience in medicaid billing required.
- Energetic self-starter. Thorough and gives careful attention to details.
- A record free of criminal violations
- Embodies high ethical stands and integrity. Accepts responsibility for decisions and conduct.
- Complies with drug-free workplace rules, board policies, and administrative guidelines/procedures.
- Ability to establish working relationships with co-workers and function as part of a cohesive team.
- Ability to interact comfortably and confidently with the public. Congenial telephone etiquette.
- Consistently dependable and flexible. Accepts new responsibilities/assignments willingly.
- Working knowledge of databases.
- Ability to use 10-key calculator efficiently.

Skills/Working Conditions:

- Must maintain valid Driver's License and an acceptable driving record
- Must be insurable by Methodist Children's Homes insurance carrier
- Must successfully complete all phases of pre-service and on-going training.
- Must be able to work in a fast paced, high pressure, high stress environment.
- Position may experience verbal and/or physical aggression from client population

Physical Requirements:

- Must provide a negative drug screen result prior to employment.
- Must pass a post-employment physical and TB test and on-going physical assessments as required

I HAVE READ AND UNDERSTAND MY JOB DESCRIPTION

Employee Signature

Date